

## BAB 6

### KESIMPULAN DAN SARAN

#### 6.1 Kesimpulan

1. Penyakit yang paling banyak mendasari gangguan sindrom delirium pada pasien usia lanjut adalah CVD (*Cerebral Vascular Disease*). Penyakit ini memiliki total persentase sebesar 19,25%.
2. Kelainan yang menonjol dari hasil pemeriksaan laboratorium pada pasien usia lanjut dengan delirium adalah penurunan jumlah hemoglobin, penurunan jumlah hematokrit, penurunan jumlah natrium, dan kalium. Dari hasil pemeriksaan laboratorium pasien pada penelitian ini, terdapat 50% pasien yang memiliki nilai hemoglobin <12 g/dL, 53,85% pasien memiliki nilai hematokrit <37, 50% pasien yang memiliki nilai natrium <136 mg/dL (hiponatremi), dan 46,15% pasien yang memiliki nilai kalium <3,5 mg/dL (hipokalemi).
3. Kondisi yang paling menonjol dari tanda vital dan *Glasgow Coma Scale* (GCS) adalah peningkatan frekuensi nafas dan penurunan GCS. Terdapat 46,15% pasien memiliki nilai frekuensi nafas >20 kali per menit dan terdapat 26,92% pasien memiliki nilai GCS 9.

#### 6.2 Saran

1. Perlu dilakukan penelitian delirium lebih lanjut dengan menggunakan data primer pada pasien rawat inap.
2. Perlu dicantumkan hasil dari uji MMSE (*Mini Mental State Examination*) dan DSM-V (*Diagnostic and Statistical Manual of Mental Disorders, 5th*

*Edition: DSM-5*) pada rekam medis pasien rawat inap dengan diagnosis delirium.

3. Hasil CT Scan yang menunjukkan lesi otak sebaiknya dilengkapi.
4. Penulisan data pasien pada rekam medis sebaiknya lebih dilengkapi untuk kepentingan pasien.

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